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HEALTH DIVISION
BUREAU OF HEALTH CARE QUALITY AND COMPLIANCE

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December 29, 2009

Dear Administrator/Chief Executive Officer:

The purpose of this correspondence is to specify that your facility is a required reporter pursuant to the adoption of Senate Bill 319 of the 2009 Legislative Session. This letter further conveys your responsibility pursuant to this measure.

As you may know, the passage of Senate Bill 319 by the 2009 Legislature requires that certain medical facilities participate in the National Healthcare Safety Network (NHSN). The measure also requires those facilities to authorize the Health Division to access the information submitted as part of the Network, and the Health Division is required to analyze the information. Senate Bill 319 requires medical facilities that provide medical services and care to an average of 25 or more patients during each business day in the immediately preceding calendar year to be a mandatory NHSN reporter.

As noted, your facility met this requirement for 2009. If your facility continues to meet this requirement for 2010, please begin the process outlined in this letter. A survey will be sent out the first week of January to confirm whether your facility will be required to report for 2010. A survey will continue to be sent out the first week of every January to determine mandatory NHSN reporting for the current year.

Regulations are being developed to determine what will be reported through NHSN. There is a lot that can be done now to prepare your medical facility for passage of these regulations.

STEPS TO GET STARTED NOW!

1. Assign your facility a NHSN Facility Administrator to enroll your facility in NHSN. There can only be one NHSN Facility Administrator per medical facility. This person will then be able to designate NHSN users.

The NHSN Facility Administrator should go to the NHSN website at <http://www.cdc.gov/nhsn/>.

AND

2. Enroll your facility in the National Healthcare Safety Network (NHSN).

Follow the step-by-step instructions in the Facility Administrator Enrollment Guide to:

- ___ Accept Rules of Behavior at: <http://www.ncid.cdc.gov/RegistrationForm/>
- ___ Register with NHSN
- ___ Obtain a digital certificate from the Secure Data Network (SDN) (if you do not already have one), selecting the National Healthcare Safety Network as the program and NHSN Enrollment as an activity. ***After installation, make a back-up copy of your digital certificate.*** **(NOTE: This may take up to 4 weeks)**
- ___ Enroll in NHSN. Access the NHSN through the SDN and select NHSN Enrollment (upper left hand corner). You must print and complete offline two forms for Patient Safety component. Then re-enter NHSN through SDN and enroll facility with completed form data.
- ___ Print, sign and return signed Consent Form to NHSN and await approval email.

3. Perform Administrative Set-up in NHSN

- ___ Access NHSN through the SDN by selecting NHSN Reporting (upper left hand corner)
- ___ Add Users and Assign User Rights (After the facility administrator adds users, each user will receive email prompts to accept Rules of Behavior, obtain a digital certificate, and select NHSN Reporting as their activity. See the User Start-Up Guide for details.)
- ___ Add Locations. If you desire, add Surgeons.
- ___ Submit a Monthly Reporting Plan through NHSN (twelve plans in all, one for each month)
- ___ The NHSN Facility Administrator and Users need to undergo NHSN training provided on the NHSN website (go the NHSN Training section). This takes approximately 18 hours per user so get started now.

Although regulations dictating what will be reported through NHSN have not yet been adopted, the following is currently in the proposed draft regulations (these may

change by the time regulations pass). This is just to give you an idea of what may be required:

HOSPITALS

- A. Central line associated bloodstream infection in the following areas would begin immediately upon passage of regulations:
 - a. Intensive care units;
 - b. Specialty care units including: Hematology/oncology wards, bone marrow transplant units, solid organ transplant units, inpatient dialysis units, and long term acute care areas;
 - c. Neonatal intensive care units; and
 - d. Any other inpatient location in the facility where denominator data can be collected such as surgical or medical wards.
- B. Methicillin-resistant staphylococcus aureus (MRSA) – Metric 1 and 2, for each specific location in the facility where denominator data can be collected would begin immediately upon passage of regulations.
- C. Antimicrobial use and resistance (AUR) option – proposed to start January 1, 2011.
- D. Surgical Site Infections – Proposed start July 1, 2011.
 - a. Deep sternal wound for cardiac surgery, including coronary artery bypass graft
 - b. Total hip and knee replacement surgery
 - c. Hysterectomy
 - d. Laminectomy

AMBULATORY SURGERY CENTERS

Surgical Site infections – Proposed to start on October 1, 2010:

- a. Gallbladder surgery;
- b. Open reduction of fracture(s);
- c. Herniorrhaphy; and
- d. Breast Surgery

INDEPENDENT CENTER FOR EMERGENCY MEDICAL CARE

- A. Healthcare personnel influenza vaccination rates; and
- B. Surveillance monitoring adherence to hand hygiene

COMING AT A LATER TIME

The Health Division is currently working on setting up a Nevada State HAI Group with a Group ID and a password to join the group. Once this has been set up the Health Division will notify all medical facilities required to report through NHSN of the Group ID and password. Upon receipt of the Group ID and password your medical facility needs to join the Nevada State HAI Group and confer rights to the Nevada State Health Division to meet your facility's obligation to report data. Instruction will be forthcoming.

Please email the name of your NHSN Facility Administrator to Stephanie Robbins, Administrative Assistant III, at srobbins@health.nv.gov. This information will be used by the Health Division to contact your medical facility with NHSN related issues.

If you have any questions or concerns related to this matter please do not hesitate to contact me at 775-687-4475, extension 235.

Sincerely,

A handwritten signature in blue ink that reads "Leticia Metherell". The signature is fluid and cursive, with the first name "Leticia" being more prominent than the last name "Metherell".

Leticia Metherell, RN, BSN, Quality Improvement Lead for
Marla McDade Williams, MPA, Bureau Chief